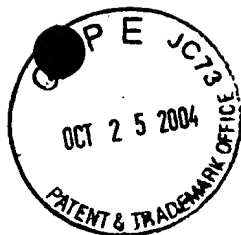


03500.014248.



PATENT APPLICATION

2612  
41

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: )  
: Examiner: Justin P. Misleh  
OSAMU HAMAMOTO )  
: Group Art Unit: 2612  
Application No.: 09/501,589 )  
: **RECEIVED**  
Filed: February 10, 2000 )  
: **OCT 28 2004**  
: **Technology Center 2600**  
For: PHOTOELECTRIC IMAGE INPUT )  
: **APPARATUS AND**  
: **PHOTOELECTRIC IMAGE INPUT**  
SYSTEM (As Amended) : **October 20, 2004**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated July 20, 2004, please amend the above-identified application as follows. The claim amendments are reflected in the listing that begins at page 2 and the Remarks begin at page 6.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

October 20, 2004  
(Date of Deposit)

Peter G. Thurlow (Reg. No. 47,138)  
(Name of Attorney for Applicant)

*Peter G. Thurlow*  
Signature

October 20, 2004  
Date of Signature



In re Application of:

OSAMU HAMAMOTO

Application No.: 09/501,589

Filed: February 10, 2000

For: PHOTOELECTRIC IMAGE INPUT APPARATUS  
AND PHOTOELECTRIC IMAGE INPUT SYSTEM  
(As Amended)

Docket No. 03500.014248.

Examiner: Justin P. Misleh

Group Art Unit: 2612

Date: October 20, 2004

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RECEIVED**  
OCT 28 2004  
Technology Center 2600

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

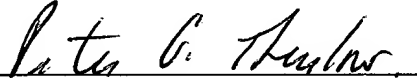
The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 12	MINUS	** 20	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	* 4	MINUS	*** 4	= 0	x \$44 \$88	\$0.00
Fee for Multiple Dependent claims \$150°/\$300						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT—						\$0.00

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.
- ☐ Charge \$\_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
Peter G. Thurlow  
Attorney for Applicant  
Registration No.: 47,138

FITZPATRICK, CELLA, HARPER & SCINTO  
30 Rockefeller Plaza  
New York, New York 10112-3800  
Facsimile: (212) 218-2200

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